

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/596334

FILING DATE

07 APR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	R		/			
4	D		/			
5	D		/			
6	D		/			
7	D		/			
8	D		/			
9	D		/			
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11	D		/			
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TOTAL IND.	1		1			
TOTAL DEP.	14	←	13	←		
TOTAL CLAIMS	15		14			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL CLAIMS						